Retail Food Inspection Report

Floyd County Health Department Telephone (812) 948-4726

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Establishment Name							Telephone Number	Date of	ID#	
A NICE RESTAURANT						Est	812-945-4321	Inspection		
Address 3129 BLACKISTON MILL ROAD, NEW ALBANY IN 47						Own 502-322-4976		07/16/2021		
Owner						Purpose		Follow Up	Released	
BOBBIE WILLS							X Routine	-	07/26/2021	
Owner's Address							Follow-up			
534 VALLEY VIEW RD CORYDON, IN 47112							Complaint			
Person in Charge AUTUMN MURPHY/PAMELA WOOD							Pre-Operational			
Responsible Person's Email							Temporary	Menu Type		
							HACCP	1 _ 2 _ 3 _	4 <u>X</u> 5 _	
Certified Food Handler PAMELA WOOD BOBBIE WILLS							Other (list)			
CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C" VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRAIVE COLUMN MARKED AS "R"										
Section #	ection# C NC R Narrative						To Be Corrected			
136	Х			Observed emplo	yee drink next to season	TODAY				
191	Χ				in walk in cooler with no	TODAY				
345	Х				lebris in handwashing si	RETRAIN STAFF				
214		Χ			g board needing to be res	7/23/21				
232		Χ		Observed warming oven above the grill to be coated in grease and dust.						
257		Χ		Observed two thermometers in front cooler to not read the correct temperature (roughly 80F),						
422		V				TODAY				
430		X X		_	yee clothing sitting on to loor to outside not being	7/23/21				
431		X			grill area to be dusty.	TODAY				
Summary of Violations C 3 NC 6 R 0										
Received by (name and title printed):							Inspected by (name and title printed): Christa Manus EHS			
AUTUMN MURPHY/PAMELA WOOD										
Received by (signature):						Ir	Inspected by (signature):			
cc:					cc:	+		cc:		